

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Harold Keith Crain et al. : Art Unit: 3726
Serial No.: 10/600,282 : Examiner: Afzali, Sarang
Filed: June 20, 2003 :
For: AN INSTALLATION TOOL FOR :
ASSEMBLING A ROTOR :
BLADE OF A GAS TURBINE :
ENGINE FAN ASSEMBLY :

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL

1. Transmitted herewith is:
 1. Amendment Transmittal (3 pages)
 2. Amendment (5 pages)

STATUS

2. Applicant
 claims small entity status.
 is other than a small entity.

EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.
(complete (a) or (b), as applicable)

- (a) _____ Applicant petitions for an extension of time under 37 C.F.R. 1.136
(Fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)

Extension for response within:	Other than small entity Fee	Small entity Fee (if applicable)
first month	\$ 120.00	\$ 60.00
second month	\$ 460.00	\$ 230.00
third month	\$ 1,050.00	\$ 525.00
fourth month	\$ 1,640.00	\$ 820.00
fifth month	\$ 2,230.00	\$1,115.00

Fee: _____ \$

If an additional extension of time is required, please consider this a petition therefor.

(Check and complete the next item, if applicable)

An extension of _____ months has already been secured. The fee paid
 therefor \$_____ is deducted from the total fee due for the total months of
 extension now requested.

Extension fee due with this request \$_____

OR

- (b) Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

(Col. 1)		(Col. 2)		(Col. 3)		SMALL ENTITY		OTHER THAN SMALL ENTITY	
CLAIMS REMAINING AFTER AMDT		HIGHEST NO. PREVIOUSLY PAID FOR		PRESENT EXTRA		ADDITIONAL RATE FEE		ADDITIONAL RATE FEE	
						x \$25.00 = \$		x \$50.00 = \$	
TOTAL INDEP.		MINUS		=		x \$25.00 = \$		x \$50.00 = \$	
		MINUS		=		x \$100.00 = \$		x \$200.00 = \$	
— FIRST PRESENTATION OF MULTIPLE DEP. CLAIM						+ \$180.00 = \$		+ \$360.00 = \$	
						TOTAL ADDITIONAL FEE \$	OR	TOTAL ADDITIONAL FEE \$	

- (a) No additional fee for Claims is required

OR

- (b) Total additional fee for claims required \$_____

FEE PAYMENT

5. Attached is a check in the sum of \$_____

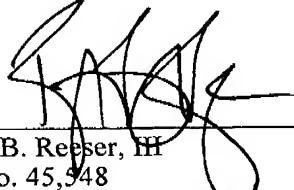
- Charge Deposit Account No. 01-2384 the sum of \$_____.
A duplicate of this transmittal is attached.

FEE DEFICIENCY6. If any additional extension and/or fee is required, charge Deposit Account No. 01-2384.

AND/OR

If any additional fee for claims is required, charge Deposit Account No. 01-2384.

7. Other:



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